

புதுச்சேரி

★ ★ ★ ★ ★

30018

NAME OF INDIVIDUAL NARRATOR

ADDRESS

City

55 55 55

51N

Task 2

සාරාංශය

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).

1. Error Message:

☐ **Parent(s).**

☒ Assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

Attorney or agent of record. Registration Number

ಪ್ರಾಧಿಕಾರ

Printed Name

REC-7-2013-0011

Darker

11/10/20

Telephone _____

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

***Total of** **forms are submitted**

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is not lawfully the USPST's property. The information is not to be disclosed to the public, and the collection of the information is not required by any other law. The information is not to be used for any other purpose, including gathering, preparing and submitting the completed application form to the USPST. There will vary depending upon the individual case. Any comments or suggestions regarding this collection of information should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Attention: Privacy Officer, 400 ...
The amount of time you require to complete this form and your suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Attention: Privacy Officer, 400 ...
ADDRESS: SEND TO: Mail Stop Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTD-9199 and select option 2.